

# **HOUSE . . . . . No. 3800**

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By Mr. Petersen of Marblehead, petition of Douglas W. Petersen and others that the Board of Registration in Medicine be directed to establish standards for patients with terminal illnesses. Public Health.

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## **The Commonwealth of Massachusetts**

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### **PETITION OF:**

Douglas W. Petersen  
Gale D. Candaras

Cory Atkin

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In the Year Two Thousand and Seven.

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### **AN ACT TO IMPROVE END OF LIFE CARE.**

*Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:*

1     SECTION 1. The general court finds that some patients in the  
2 Commonwealth suffer unnecessary pain and other forms of pro-  
3 longed discomfort at the end of their lives and that the availability of  
4 better care would reduce the incidence of this suffering. The general  
5 court further finds that health care providers may be reluctant to pro-  
6 vide adequate pain relieving medication to some patients at the end  
7 of their lives as a result of doubts as to the state of the law or profes-  
8 sional regulatory requirements. Finally, the general court finds that  
9 the development of specific professional standards would assist  
10 health care providers to meet the needs of patients requiring end of  
11 life care.

1     SECTION 2. The board of registration in medicine shall, on or  
2 before December 30, 2004, submit a report to the Joint Committee  
3 on Health Care and the Department of Public Health, which shall  
4 recommend a process by which standards for end of life care that  
5 registered physicians provide to patients in the Commonwealth, can  
6 be promulgated. In developing said recommendations the Board  
7 shall ensure that said process is able to:—  
8       a.) describe the circumstances under which a physician may  
9 regard a patient as suffering from a terminal illness;

10        b.) set forth specific protocols, including pharmacological guide-  
11        lines, for the treatment of patients suffering from specific terminal  
12        illnesses;  
13        c.) require registered physicians in appropriate specialties or prac-  
14        tices to obtain continuing medical education in subjects related to the  
15        care of patients at the end of life; and,  
16        d.) establish principles to govern the board's determination of  
17        complaints against registered physicians arising out of end of life  
18        care situations.

1        SECTION 3. The commissioner of the department of public  
2        health shall establish within the department of public health the  
3        office of end of life care ombudsman. The commissioner shall  
4        appoint an individual, qualified by education, training, and experi-  
5        ence, to the position of the director of this office, and this appoint-  
6        ment, while not subject to the provisions of chapter thirty-one,  
7        requires the approval of the public health council. The director of the  
8        office of end of life care that licensees of the department provide;  
9        shall investigate these complaints; and shall refer these complaints,  
10       upon their receipt or after investigation as the director may deter-  
11       mine, to the commissioner, the board of registration in medicine, or  
12       the attorney general of the Commonwealth as the director deter-  
13       mines appropriate. The director shall also develop educational and  
14       informational programs and materials regarding end of life care and  
15       shall make these programs and materials available to licensees of the  
16       department, other agencies of the Commonwealth, and the public.

17       The commissioner shall, after notice and hearing pursuant to the  
18       provisions of chapter thirty A of the General Laws, adopt regulations  
19       that establish standards for end of life care that licensees of the  
20       department provide to patients in the Commonwealth. The commis-  
21       sioner shall, by regulation, establish reporting requirements applic-  
22       able to licensees of the Commonwealth regarding end of life care  
23       matters, including the incidence of refractory pain, suffering, or  
24       other forms of distress; the effectiveness or ineffectiveness of treat-  
25       ment modalities in end of life care situations; complaints received  
26       from patients and their resolution; and such other information as the  
27       commissioner determines appropriate.

28       On the first day of April following enactment and annually there-  
29       after, the commissioner shall file with the joint health care com-

30 mittee of the general court a report of the activities of the department  
31 during the prior calendar year with respect to end of life care matters  
32 and shall include in the report any recommendations for legislation  
33 that the commissioner determines appropriate for the General Court  
34 to consider.